



CARTER ALBRECHT MUSIC FOUNDATION

MUSIC SCHOLARSHIP APPLICATION

Mail to:
CAMF
6627 Misty Creek Lane
Temple, TX 76502

GENERAL INFORMATION

Student Name _____
Date of Birth _____
Home Address _____
Zipcode _____
E-mail Address _____
Telephone(s) _____

MUSICAL BACKGROUND

Which instruments have you studied?

Name of private teacher for each instrument and number of years studied

Teacher(s) Phone Numbers _____

Is teacher a member of TMTA? YES or NO
Or list other professional credentials

Length of study with current teacher(s)



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Theory Test score (Grades 11 and 12) _____

Which college will you attend? _____

Date of acceptance _____

Do you have other scholarships? _____

Performance/Festival Activity	Composition/Composer	Rating
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1. _____

2. _____

Other awards or recognitions: _____

- **Please provide copies of theory test scores and adjudicated event comments.**
- **Prepare two selections for audition on the instrument of your choice.**
- **Provide two letters of recommendation.**
- **Provide a digital photo (jpg) of yourself.**